## **Pre-Surgical Consent Form**

## **Please Read Carefully**

I understand that during the performance of my pet's surgery or dentistry unforeseen conditions may be revealed that necessitate an extension to or variation from the procedure for which he/she is being admitted. I expect the veterinarian to use reasonable care and judgment in performing the procedure(s). I understand that some risks always exist with anesthesia and surgery and that I am encouraged to discuss any concerns or questions with the veterinarian prior to the initiation of the procedure(s). My signature on this form indicates that any questions regarding these issues have been answered to my satisfaction. I am also aware that unforeseen events resulting from the procedure will not relieve me from any obligations to all reasonable costs incurred regarding my pet. I understand that pain medications are included in the cost of surgery and will be provided. If your pet is in heat or is pregnant, an extra charge for the surgery will be applied. We discourage surgery in pregnant or in heat animals.

Procedure(s)		Pet's N	ame	
Signature	Date	Phone	Number	
We recommend a complete blood count side effects. These tests are similar to th			o any anesthesia to further eliminate any	potential
Su	uggested Profiles- Plea	ase Initial Ap <sub>l</sub>	propriate Box	
Option #1: PATIENTS OVER 8 YEARS OF A	GE AND ALL LARGE AN	IIMALS		
Includes a Complete Blood Count (assesses anemia/infection)				
BUN (kidney) Creatinine (kidney) Glucose (diabetes) ALP/ALT (liver enzymes) Calcium (certain cancers)				
\$150.00 IN ADDITION to surger	ry cost			
Option #2: DECLINE				
I decline the recommended bloodwork at this time and request that the veterinarian proceed				
with anesthesia.				
	Opti	ional Procedu	ures	
Vaccinations	Heartworm Test	ting	Heartworm Preventative	
Flea/Tick Pı	reventative	FeLV/FIV	Testing	
I understand that I will receive a te		one number l uctions.	provided) to receive post-operative disch	narge